# FFICER'S BATTERY REPORT
## HICAGO POLICE DEPARTMENT

RD NO. **HZ521205**

ISTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated sault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, gravated assault, or assault while in the performance of his or her duties.

**"X APPLICABLE BOXES"**

## OFFICER INFORMATION

AME (LAST - FIRST - M.I.)
**ARROYO, DANNY D**

| TAR NO. | POSITION |
|---|---|
| 14057 | **POLICE OFFICER** |

| ATE OF APPOINTMENT | EMPLOYEE NO. |
|---|---|
| 14-DEC-2012 | ▮ |

| NIT OF ASSIGNMENT | BEAT/CALL NO. |
|---|---|
| 007 | 0726R |

| EX | RACE | DOB |
|---|---|---|
| ☒1. M ☐2. F | **WHITE HISPANIC** | ▮ |

| EIGHT | WEIGHT |
|---|---|
| 508 | 150 |

### TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED

☒ 1. ON DUTY
- ☒ A. UNIFORM, PATROL DUTY
- ☐ B. UNIFORM, OTHER DUTY
  Describe _____
- ☐ C. CITIZEN'S DRESS
- ☐ D. TACTICAL
- ☐ E. B.I.S. UNIT
- ☐ F. SPECIAL EMPLOYMENT
- ☐ G. OTHER _____

☐ 2. OFF DUTY
☐ 3. SPECIAL EMPLOYMENT
☐ 4. SECONDARY / OTHER

WORKING:
- ☐ A. ALONE
- ☒ B. WITH ONE PARTNER
- ☐ C. WITH MULTIPLE PARTNERS
  How many? _____

PATROL TYPE:
- ☒ A. SQUAD CAR
- ☐ B. FOOT
- ☐ C. BICYCLE
- ☐ D. APV/MOTORCYCLE
- ☐ E. SQUADROL
- ☐ F. OTHER _____

### TYPE OF ACTIVITY

- ☐ A. AMBUSH -NO WARNING
- ☐ B. TRAFFIC STOP/PURSUIT
- ☐ C. INVESTIGATING SUSPICIOUS PERSON
- ☐ D. DISTURBANCE - DOMESTIC
- ☐ E. DISTURBANCE - MENTAL PATIENT
- ☐ F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER
- ☒ G. DISTURBANCE - OTHER
- ☒ H. MAN WITH A GUN
- ☐ I. PURSUING/ARRESTING OFFENDER (Specify)
  CHARGE _____ IUCR CODE _____
- ☐ J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify
  ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____
- ☐ K. OTHER

### TYPE OF INJURY TO OFFICER

- ☐ A. FATAL
- ☐ B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/ Internal Injuries)
- ☐ C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions)
- ☒ D. NONE APPARENT/NONE

### LIGHTING CONDITIONS AT INCIDENT

- ☐ A. DAYLIGHT
- ☐ B. NIGHT
- ☐ C. DAWN
- ☐ D. DUSK
- ☒ E. ARTIFICIAL LIGHT
  - ☐ 1. POOR
  - ☒ 2. GOOD

## INCIDENT INFORMATION

☐ 1. INDOOR    ☒ 2. OUTDOOR

ADDRESS OF OCCURRENCE
**2005 W 69TH ST**

| CITY | STATE (If outside Chicago) |
|---|---|
| ☒ CHICAGO ☐ | |

| LOCATION CODE | BEAT OF OCCURRENCE |
|---|---|
| 304-STREET | 0735 |

| DATE OF OCCURRENCE | TIME | DAY OF WEEK |
|---|---|---|
| 18-NOV-2016 | 23:49:00 | FRIDAY |

NO. OF OFFICERS BATTERED __2__

WERE THERE ASSISTING UNITS ON SCENE?   1. ☐ YES   2. ☒ NO

IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS) ? __0__

### MANNER OF ATTACK

- ☐ 01. SHOT
- ☐ 02. SHOT AT
- ☐ 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT)
- ☐ 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT)
- ☒ 05. OTHER (INCLUDING VERBAL THREATS)

### TYPE OF WEAPON/THREAT

(Check all that apply):
- ☐ A. FIREARM CALIBER _____
  - ☐ 1. REVOLVER
  - ☐ 2. SEMI-AUTOMATIC
  - ☐ 3. RIFLE
  - ☐ 4. SHOTGUN
- ☐ D. HANDS/FISTS
- ☐ E. FEET
- ☐ F. MOUTH (SPIT, BITE, ETC.)
- ☐ G. VERBAL THREAT (ASSAULT)
- ☒ H. OTHER (SPECIFY) /OFFENDER DISCHARGED FIREARM

- ☐ B. VEHICLE
  - ☐ 1. OFFICER STRUCK WITH VEHICLE
  - ☐ 2. ATTEMPTED TO STRIKE OFFICER WITH VEHICLE
- ☐ C. KNIFE/OTHER CUTTING INSTRUMENT    ☐ I. BLUNT INSTRUMENT

FIREARM USE INFORMATION    (Check all that apply):
- ☐ A. OFFICER AT GUNPOINT
- ☐ B. OFFICER'S OWN WEAPON OBTAINED
- ☐ C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON

### OFFENDER INFORMATION

| SEX | RACE | DOB |
|---|---|---|
| ☒1. M ☐2. F | **BLACK** | 04-MAR-1990 |

| CB NO. | IR NO. |
|---|---|
| | |

WAS THE OFFENDER'S ACTIVITY:

DRUG RELATED?
- ☐ 1. YES
- ☐ 2. NO
- ☒ 3. UNKNOWN

GANG RELATED?
- ☐ 1. YES
- ☐ 2. NO
- ☒ 3. UNKNOWN

NO. OF OFFENDERS PRESENT? __1__

### WEATHER CONDITIONS

- ☒ A. CLEAR
- ☐ B. RAIN
- ☐ C. SNOW
- ☐ D. FOG / SMOKE / HAZE
- ☐ E. SLEET / HAIL
- ☐ F. SEVERE CROSS WIND
- ☐ G. OTHER

APPROXIMATE OUTDOOR TEMPERATURE: __40__ °F

CPD-11.451 (REV. 1/04)

Unusual Circumstances Regarding Officer Control Tactics and Safety. (If you need more space use additional sheets).

| REPORTING MEMBER - SIGNATURE | STAR NO. | WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE | STAR NO. |
|---|---|---|---|
| **ARROYO, DANNY D** | **14057** | **O DONNELL, JAMES C** | **13** |

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